Selected Childhood Obesity-Related Legislation in the Connecticut General Assembly

June 2, 2005

Bill #	Title	Status	Provisions
S.B. 1309	An Act Concerning School	Awaiting action by Governor	 Requires a daily minimum period of 20 minutes per full school day for physical activity outside of physical education for students in grades K-5.
(File No. 783)	Nutrition	Senate approved with Senate amendment A and House amendment A (May 25)	Permits the establishment of School Wellness Committees to monitor and implement nutrition and physical activity policies.
		House approved with Senate amendment A and House amendment A (May 18) Senate approved with	• Limits the types of beverages sold to students on school premises to water, milk, 100% fruit and/or vegetable juice, and fruit juice/water-only drinks, and for high school students after the school day only, sugar-free soft drinks and electrolyte replacement beverages, except that school boards may permit schools to sell other beverages at middle and high school afterschool events.
		Senate amendment A (April 27) Approved by Education (March 28)	 Limits foods sold to students on school premises to a State Department of Education (SDE) list of prepackaged foods, non-prepackaged foods meeting nutritional standards set by SDE, and foods served as part of the National School Lunch and School Breakfast programs, except that school boards may permit schools to sell other foods at afterschool
		[The bill does not have a significant fiscal note.]	events.
H.B. 6631	An Act Concerning	Referred by House to Appropriations (April 11)	Establishes a State Childhood Obesity Prevention Council (1) to serve as a central state resource for information regarding childhood obesity
(File No.	Childhood Obesity	Approved by Public Health (March 18)	prevention policies and initiatives, (2) to convene a student advisory subcommittee to promote youth leadership on obesity prevention, and (3) to develop a plan to reduce obesity related health complications in

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Bill # 203)	Title	Approved by Children (March 1)	children. The plan would: o identify state resources that address childhood obesity o document and review state data on childhood obesity and best practices o review the effectiveness of interventions and pilot projects o develop a state nutrition policy o recommend obesity policies for communities and schools o develop a public education and outreach campaign o recommend guidelines to encourage local planning and zoning that supports active lifestyles
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			Requires the Commissioners of Insurance and Public Health to recommend how health insurance coverage may promote obesity prevention.